PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

plication or Docket Number

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER	THAN
			(Column	1)	(Column 2)			TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			40					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			49' minus 20=		· 29		,	X\$ 9=	201	OR	X\$18=	
INDEPENDENT CLAIMS			() minus 3 =		3			X40=	120	OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT							1	-135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	T	OTAL	734	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
(Column 1) (Column 2) (Column 3)								MALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=)	K\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	7	X40=		OR	X80=	
Ш	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	CLAIM		+	·135=		OR	+270=	
							<u> </u>	TOTAL	<u> </u>	ام	TOTAL	
		ADI	OIT. FEE			ADDIT. FEE	<u> </u>					
Г		(Column 1) CLAIMS	1001	(Colu		(Column 3)			4001			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA	. F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18≃	
	Independent		Minus	***		=	>	K40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
. _								135=		OR	+270=	
	4							TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colui	mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	bacadar	HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	Х	(\$ 9=		OR	X\$18=	7
	Independent	*	Minus	***	T 01 1111	=		(40=		OR	X80=	
Ļ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							135=		,		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	nber Previously Pa	aid For" (Total o	r Independ	lent) is the	highest number	r found i	in the app	ropriate box	in col	umn 1.	